

File with:
Iowa Ethics and Campaign
Disclosure Board
610 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Robert Lind

IMPORTANT: Indicate by # type of committee you are reporting for: 6

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	
Logged In	
Scanned	
Computer	
Audited	

late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Patricia Lind
SIGNATURE OF PERSON FILING REPORT

141.856.2571
TELEPHONE

10/31/07
DATE SIGNED

I AM FILING A 10/31/07 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committee, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

0.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A. Cash Contributions total (Attach Schedule A) (**also see in-kind below)

1,490.00

Schedule F. Loans Received total (Attach Schedule F)

0.00

Schedule H. Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

1,490.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B. Expenditures total (Attach Schedule B) (**also see debts and loans below)

1,279.35

Schedule F. Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

210.65

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 0.00

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO ☐

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Receipt Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Robert Lind

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 88B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/01/07	ID# CK#	Bill Ursta 417 South 15th Street, Centerville, IA 52544		\$ 40.00	<input type="checkbox"/>
10/02/07	ID# CK#	Robert Lind 22200 - 207th Avenue, Centerville, IA 52544	Candidate	150.00	<input type="checkbox"/>
10/06/07	ID# CK#	Unitemized Contributions		110.00	<input type="checkbox"/>
10/06/07	ID# CK#	Raymond and Patricia Tresemer 1110 W. Ontario, Centerville, IA 52544		50.00	<input type="checkbox"/>
10/11/07	ID# CK#	Robert Rosencranz W. Terra Vista, Centerville, IA 52544		40.00	<input type="checkbox"/>
10/12/07	ID# CK#	Unitemized Contributions		100.00	<input type="checkbox"/>
10/13/07	ID# CK#	Brad and Dewey McConville 21793 - 207th Avenue, Centerville, IA 52544		50.00	<input type="checkbox"/>
10/16/07	ID# CK#	Unitemized Contributions		60.00	<input type="checkbox"/>
10/19/07	ID# CK#	Unitemized Contributions		200.00	<input type="checkbox"/>
10/19/07	ID# CK#	William Buss 402 East Maple Street, Centerville, IA 52544		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 850.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Robert Lind

SCHEDULE**A**

(Rev 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/19/07	ID# CK#	Diane Nuss 402 East Maple Street, Centerville, IA 52544		\$ 50.00	<input type="checkbox"/>
10/20/07	ID# CK#	Unitemized Contributions		20.00	<input type="checkbox"/>
10/24/07	ID# CK#	Tom and Kathy Lange 800 West Lane, Centerville, IA 52544		100.00	<input type="checkbox"/>
10/24/07	ID# CK#	Justine C. Heffron 20452 - 205th Avenue, Centerville, IA 52544		100.00	<input type="checkbox"/>
10/24/07	ID# CK#	Unitemized Contributions		70.00	<input type="checkbox"/>
10/25/07	ID# CK#	Dan and Nancy Bennett 317 North 13th Street, Centerville, IA 52544		50.00	<input type="checkbox"/>
10/26/07	ID# CK#	David and Deb Lind 521 South 26th Street, West Des Moines, IA 50265		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 640.00	
TOTAL (if last page of this schedule)				\$ 1,490.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Robert Lind

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/02/07	ID# CK#	Fast Signs 1791 NW 86th Clive, IA 50325	Yard Signs	\$ 150.00
10/16/07	ID# CK#	Arrow Graphix 303 North 13th Street Centerville, IA 52544	Yard Signs	269.64
10/19/07	ID# CK#	Fast Signs 1791 NW 86th Clive, IA 50325	Yard Signs	194.50
10/23/07	ID# CK#	Postmaster Centerville, IA 52544	Postage to Mail Campaign Statement of Organization	5.21
10/26/07	ID# CK#	Radio KCOG-KMGO 402 North 12th Street Centerville, IA 52544	Campaign Ads for Radio	460.00
10/26/07	ID# CK#	Iowegian 105 North Main Street Centerville, IA 52544	Campaign Ads for Newspaper	200.00
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$ 1,279.35

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i))

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(for Schedule B)